

# Florida Grapefruit Survey Facilitator Instructions

Good morning. We are here representing the Florida Department of Agriculture and Consumer Services' Division of Marketing and Development. The purpose of survey is to get your opinion about grapefruit and to determine your consumption of that fruit. Your opinions and ideas are very important to the people who produce and market this product.

Each of you are being handed a survey form and I am requesting that you complete the introduction section to tell us a little bit about you. The introduction section is on page 1 only. It makes no difference if you use a pen or pencil to complete this survey. When you have completed it, please put down your pen or pencil. You do not need to sign your name. However, if you would like further information about the results of this study, please provide contact information on the survey. Please complete the introduction section now.

*(Pause for completion)*

Please turn to the second page of the survey. Each of you is getting the first of three samples of grapefruit. Please eat the first sample, Sample A, then rate it for the qualities listed on the second page of the evaluation. We ask that you do not discuss your opinion of the sample during the sampling session. We want your unbiased opinion and do not want you to be influenced by your classmates and friends. When you have completed the second page please put down your pen or pencil.

*(Pause for completion)*

Please turn to the third page of the survey and take a drink of water. The water will neutralize the taste from the last sample. Eat the second sample, Sample B, then rate it for the qualities listed on the third page of the evaluation.

*(Pause for completion)*

Please turn to the fourth page of the survey and take a drink of water. Eat the third sample, Sample C, then rate it for the qualities listed on the fourth page of the evaluation.

*(Pause for completion)*

Please pass forward your survey form. Thank you for working with us by completing this questionnaire. The information gathered here and at other venues will be used to improve marketing of Florida grapefruit.

# Florida Grapefruit Survey Introduction

*Please check only one answer unless otherwise stated.*

**Age:**        ☐ 10-13                      ☐ 14-19                      ☐ 20 or older

**Are you:**        ☐ Male            or            ☐ Female

**What is your classification?**    ☐ Grade        ☐ Other (please  
specify)\_\_\_\_\_

**How often do you eat grapefruit?**        ☐ several times a week        ☐ once a week  
☐ once or twice a month        ☐ less than one a month        ☐ never

**Do you eat it for (check all that apply):**    ☐ Breakfast            ☐ Lunch  
☐ Dinner/Supper    ☐ Snack            ☐ Dessert            ☐ Never

**What is your favorite citrus fruit? (check one only)**    ☐ Orange    ☐ Grapefruit  
☐ Tangerine        ☐ Kumquat    ☐ Tangelo    ☐ Lime  
☐ Other (please identify)\_\_\_\_\_

**How often do you eat your favorite citrus fruit?**    ☐ several times a week    ☐ once a week  
☐ once or twice a month    ☐ less than one a month

**Do you eat your favorite citrus fruit for:**    ☐ Breakfast                      ☐ Lunch  
☐ Dinner or Supper                      ☐ Snack                      ☐ Dessert

**What do you like best about your favorite citrus fruit?**    ☐ Flavor        ☐ Aroma  
☐ Easy to prepare    ☐ Health benefits    ☐ Easy to take with you    ☐ Easy to find  
☐ Parents approve    ☐ Other (please describe)\_\_\_\_\_

**Please put down your pencil or pen.**

# Florida Grapefruit Survey

## Sample A

Please answer the following questions for Sample A only.

1. On a scale of 1 to 5, 1 being the worst and 5 the best, how would you rate this sample overall? (circle answer) (worst) 1      2      3      4      5 (best)
  
2. On a scale of 1 to 5, 1 being the worst and 5 the best, how would you rate this sample as compared to other grapefruit that you have eaten? (circle answer)  
(worst) 1      2      3      4      5 (best)
  
3. On a scale of 1 to 5, 1 being the worst and 5 the best, how would you rate this sample when compared to your favorite citrus fruit? (circle answer)  
(worst) 1      2      3      4      5 (best)
  
4. The feature I like best about Sample A is (check only one):    \_\_\_ the flavor    \_\_\_ the color  
                          \_\_\_ the acidity    \_\_\_ health benefits    \_\_\_ the juiciness    \_\_\_ the aroma  
                          \_\_\_ other (please describe) \_\_\_\_\_
  
5. I would eat this sample for (check all that apply):    \_\_\_ breakfast  
                          \_\_\_ lunch    \_\_\_ dinner or supper    \_\_\_ snack    \_\_\_ dessert
  
6. How often would you like to have this sample to eat?    \_\_\_ several times a week  
                          \_\_\_ once a week    \_\_\_ once or twice a month    \_\_\_ less than one a month

**Please put down your pen or pencil.**

# Florida Grapefruit Survey

## Sample B

Please answer the following questions for Sample B only.

1. On a scale of 1 to 5, 1 being the worst and 5 the best, how would you rate this sample overall? (circle answer) (worst) 1      2      3      4      5 (best)
  
2. On a scale of 1 to 5, 1 being the worst and 5 the best, how would you rate this sample as compared to other grapefruit that you have eaten? (circle answer)  
(worst) 1      2      3      4      5 (best)
  
3. On a scale of 1 to 5, 1 being the worst and 5 the best, how would you rate this sample when compared to your favorite citrus fruit? (circle answer)  
(worst) 1      2      3      4      5 (best)
  
4. The feature I like best about Sample B is (check only one): \_\_\_\_the flavor    \_\_\_\_the color  
\_\_\_\_the acidity    \_\_\_\_health benefits    \_\_\_\_the juiciness    \_\_\_\_the aroma  
\_\_\_\_other (please describe) \_\_\_\_\_
  
5. I would eat this sample for (check all that apply): \_\_\_\_breakfast  
\_\_\_\_lunch    \_\_\_\_dinner / supper    \_\_\_\_snack    \_\_\_\_dessert
  
6. How often would you like to have this sample to eat? \_\_\_\_several times a week  
\_\_\_\_once a week    \_\_\_\_once or twice a month    \_\_\_\_less than one a month

**Please put down your pen or pencil.**

# Florida Grapefruit Survey

## Sample C

Please answer the following questions for Sample C only.

1. On a scale of 1 to 5, 1 being the worst and 5 the best, how would you rate this sample overall? (circle answer) (worst) 1      2      3      4      5 (best)
  
2. On a scale of 1 to 5, 1 being the worst and 5 the best, how would you rate this sample as compared to other grapefruit that you have eaten? (circle answer)  
(worst) 1      2      3      4      5 (best)
  
3. On a scale of 1 to 5, 1 being the worst and 5 the best, how would you rate this sample when compared to your favorite citrus fruit? (circle answer)  
(worst) 1      2      3      4      5 (best)
  
4. The feature I like best about Sample C is (check only one):    \_\_\_ the flavor    \_\_\_ the color  
                          \_\_\_ the acidity    \_\_\_ health benefits    \_\_\_ the juiciness    \_\_\_ the aroma  
                          \_\_\_ other (please describe) \_\_\_\_\_
  
5. I would eat this sample for (check all that apply):    \_\_\_ breakfast  
                          \_\_\_ lunch    \_\_\_ dinner or supper    \_\_\_ snack    \_\_\_ dessert
  
6. How often would you like to have this sample to eat?    \_\_\_ several times a week  
                          \_\_\_ once a week    \_\_\_ once or twice a month    \_\_\_ less than one a month
  
7. Which of the three samples did you like best? (circle one)    A      B      C

**Please put down your pen or pencil.**